

VERIFICATION OF CALIBRATION REPORT

of DataMaster cdm Breath Test Instrument

State of Alaska

JAN 08 2010

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

Supervisor/Operator Performing the Verification Procedure:	
Name <u>Sean Fielding</u>	ID# <u>5189</u> Date <u>12/24/09</u>
Agency <u>Denali National Park</u>	Phone # <u>683-9528</u>
Instrument Location <u>Denali National Park - HQ</u>	
Alco S/N <u>X301553</u>	Target Value <u>.083</u> High Pressure <u>550</u>
Alco Test Value Average <u>.085</u>	<u>.085</u>
1 st Alco	2 nd Alco
Signature <u>[Signature]</u>	
(OVER)	

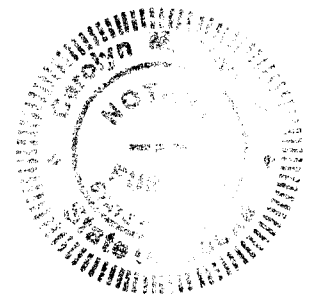
I, Nita J. Bolz, after being first duly sworn, depose and state as follows: (Do Not write in the area below)

- (1) I am a Forensic Scientist IV at the State of Alaska Scientific Crime Detection Laboratory.
- (2) The Alaska Scientific Crime Detection Laboratory is an entity within the Department of Public Safety.
- (3) I am the Scientific Director of the State Breath Alcohol Program.
- (4) In that capacity, I am responsible for overseeing the breath alcohol program, including assuring that persons responsible for verifying the calibration of instruments are properly trained and qualified. I also am responsible for maintaining the records of the program.
- (5) The attached verification is a true and accurate verification of calibration that reflects a regularly conducted and regularly recorded activity of the breath alcohol program performed by a person trained and qualified to conduct the verification.
- (6) The referenced instrument is certified for evidentiary use in the State of Alaska.

Nita J. Bolz
Nita J. Bolz
Scientific Director
State Breath Alcohol Program

Subscribed and sworn before me this 26th day of January 2010.

[Signature]
Carolyn M. Noland
Notary Public, State of Alaska
Commission Expires with Office



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of DataMaster cdm breath Test Instrument

State of Alaska

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

DataMaster cdm S/N 130291

(CONTINUED FROM FRONT PAGE)

C TAPE THE TEST STRIP FROM THE NONDRINKING SUBJECT TEST AND THE DIAGNOSTIC CHECK IN THE MARKED BOXES.

NONDRINKING SUBJECT TEST

[Box for Nondrinking Subject Test]

✓
BMB
11/3/10

✓

✓
BMB
11/3/10

[Box for Nondrinking Subject Test]

DIAGNOSTIC CHECK

[Box for Diagnostic Check]

✓

✓

✓

✓

✓

✓

✓

✓

✓

✓